

Volunteer Registration



Arrowhead RSVP/Northland

Volunteer Center

702 3 Avenue South, Virginia MN 55792
(218) 410-3090 or 1-800-662-5711 ext. 6832
TTY 1-800-862-0175
E-mail: patty.stensland@aeoa.org



Required Information

Name: _____

Mailing Address _____

Birthdate (required) _____ Telephone Number: _____

E-mail Address: _____

Are you volunteering now? _____ Where? _____

I will be requesting travel reimbursement: _____ No _____ Yes

I will travel to my volunteer assignment by: _____ Driving*
_____ Public transportation
_____ Walking
_____ Other ride

*If driving, complete this information which is required by our insurance carrier:

Personal Driver's License Number: _____

Auto Insurance Company: _____

RSVP Accident Insurance Information: (Please name a beneficiary or write the word "Estate.")

Name: _____

Address: _____

Relationship: _____

As an RSVP volunteer, I understand that I may be contacted by program staff with information about new volunteer opportunities in my area and I agree to serve when possible.

Volunteer Signature: _____

Date: _____

Optional Information

My Ethnic Group is: American Indian/Alaska Native
 Asian
 Black or African American
 Native Hawaiian/Pacific Islander
 White
 Other: _____

Are You Hispanic/Latino? Yes No
Are You a Military Veteran? Yes No
Are You an Active Armed Forces/Reserve Member? Yes No

My Gender is: Male Female

Physical conditions to consider in making a volunteer assignment:

Hobbies/Skills:

Previous Work/Occupation:

I give my permission to use my name or picture in publicity, newsletters, annual reports, etc.

Yes
 No

This program is available to all, without regard to race, color, national origin, disability, gender, religion, or political affiliation.

All information is kept confidential.
RSVP is part of Senior Corps
and sponsored by AEOA.



RSVP staff signature _____

Date _____